asylums, making it impossible to obtain a sufficient number of such skilled and trained attendants as are necessary to secure the best results by individualizing the treatment.

III. In reply to your third question, I would say that I would wish that the position of superintendent of an asylum for the insane should be entirely independent of politics and politicians, and that the best man for the place should be appointed, regardless of whether he is a resident of the State or not. This might be done through the United States Civil Service Commission.

I would have the superintendent a medical man, but the treatment of the cases and the scientific work of the institution should be in other hands. I would separate, as far as possible, the hopelessly incurable cases from those which might be expected to yield good results to treatment, and concentrate upon these last the expenditure for experts, skilled nurses, and for special appliances and comforts.

I would provide greater facilities and inducements than now exist to have well-educated, young medical men employed as assistants in the clinical work of asylums.

For asylums near large cities, I would have a consulting staff of physicians, *i. e.*, specialists.

Yours respectfully,

J. S. BILLINGS.

FROM DR. C. L. DANA.

New York, February 9, 1894.

Dear Dr. Mitchell:

With reference to your inquiries regarding the management of insane asylums in America, I should say, "No" to your first question, but then nothing is quite perfect and a negative answer means little.

The special defects vary greatly in different States, and something must be considered and allowed for new social organizations and a busy and a not very wealthy population I refer now especially to many southern and western institutions.

I believe that all over the country the great trouble is that the people do not understand what a difficult, costly and important problem the care of the insane is. Hence comes the evil of political management and as a result

the necessity of doing things economically and yet of taking care of the "boys."

In States like New York, where there is long experience, and a wealthy State behind the asylums there is less excuse for deficiency in management.

I will only state the points which most impress me:

There is great lack of sound psychological knowledge, an utter deficiency in knowledge of cerebro-spinal anatomy and physiology and a most dead and hopeless attitude therapeutically towards the patients. Furthermore, there is no thorough knowledge of nerve pathology among asylum alienists. I think that an alienist who is at all a qualified man should be a fair neurologist and pathologist, should know modern psychology and should be a hopeful therapeutist.

Isn't this a large enough indictment? To it, however, the answer may be justly made that asylum managers do not pay enough to secure such men. I should add that there are a number of asylum men who do possess the requirements which are so generally lacking.

Yours truly,

CHARLES L. DANA.

FROM DR. F. X. DERCUM.

January 27, 1894.

Dear Doctor Mitchell:

Your letter in reference to hospitals for the insane has suggested the following thoughts to me:

First, in relation to attendants. Attendants, especially those in State and other public hospitals, are not recruited from a very high class of men and women. When we reflect upon the pecuniary inducement that is offered (about $19 a month) we can not be surprised to find this the case. It is to be wondered at that anyone should for such pay be willing to discharge duties, exacting, onerous and often exceedingly unpleasant. Surely if any position requires qualities of a high order, gentleness, tact, good judgment, firmness, courage, and above all self-control, it is that of asylum attendant. Again, little or no systematic effort is made to train men and women for the duties of such positions. Nothing comparable to a nurses' training school exists, to my knowledge, in any of the insane hospitals. I know of none in